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Applicant(s): Pitzele, et al.

Docket No.

S03313 US

Serial No.

09/835,196

Filing Date

April 13, 2001

Examiner

Paul A. Zucker

Group Art Unit

1621

Invention: 2-AMINO-4, 5 HEPTENOIC ACID DERIVATIVES USEFUL AS NITRIC OXIDE SYNTHASE INHIBITORS

I hereby certify that the following correspondence:

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(Identify type of correspondence)

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10-06-03

1621/4

PTO/SB/17 (5-03)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$18.00

Complete if Known

Application Number	09/835,196
Filing Date	April 13, 2001
First Named Inventor	Pitzle
Examiner Name	Paul A. Zucker
Group Art Unit	1621
Attorney Docket No.	S03313 US

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METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	3. ADDITIONAL FEES	
<input type="checkbox"/> Money Order	<input type="checkbox"/> Other		
<input checked="" type="checkbox"/> Deposit Account:			
Deposit Account Number	19-1025		
Deposit Account Name	Pharmacia Corporation		
The Commissioner is authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below			
<input checked="" type="checkbox"/> Credit any overpayments			
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity	Small Entity		
Fee Code	Fee Code	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			
2. EXTRA CLAIM FEES FOR UTILITY AND			
Extra Claims		Fee from below	Fee Paid
Total Claims	1 -20** = 0	X 18.00	= 18.00
Independent Claims	1 -3** = 0	X	= 0.00
Multiple Dependent			
Large Entity	Small Entity		
Fee Code	Fee Code	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 84	2201 42	Independent claims in excess of 3	
1203 280	2203 140	Multiple dependent claim, if not paid	
1204 84	2204 42	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			\$18.00
**or number previously paid, if greater, For Reissues, see above			
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Philip B. Polster, II	Registration No. (Attorney/Agent)	43,864
Signature		Telephone	314-274-9094
		Date	October 3, 2003

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